

SWIMMING POOLS
(ABOVE GROUND & INGROUND)

Town of Brookfield

Procedure for Obtaining a Building Permit

****PLEASE READ CAREFULLY****

Failure to comply with these requirements will delay the review of your application.

The Permit Application documents must be completed in ink or typed. The following is a list of the documents and information that must be submitted in order to process your application. The Land Use Office staff will ensure that the materials are distributed to each of the Land Use departments for review.

Swimming Pool Document Checklist

- Tax Collector Sign-off
- Copy of Wetlands permit or Subdivision Wetlands permit if work is within 75' of a wetland or 100' of a body of water or 200' from the Still River, Candlewood Lake or Lake Lillinonah
- Completed Pool/Hot Tub Application Zoning Approval Request
- Re-inspection fee acknowledgement
- Letter of Authorization from property owner
- Worker's Compensation affidavit
- Electrical Code Selection Sheet signed and dated.
- Swimming Pool Agreement to Install and Maintain Safety Requirements for pools
- Alarm Agreement Letter for pools
- Town of Brookfield Limitation of Appeals on Certificates of Zoning Compliance
- Water Pollution Control Authority Review Sheet
- Contractor's license and proof of insurance
- 2 copies of Site Plan with building setbacks and location of well and septic system clearly marked to scale.
- 2 Sets of Building Plans
- B-100 compliance for septic system
- Fees (includes Certificate of Zoning Compliance fee, Health Plan review fee, Building Permit fees, Certificate of Occupancy fee)

A schedule of building fees is available separately.

Building Permit # _____

Activity #: _____

TOWN OF BROOKFIELD DEPARTMENT APPROVAL CHECKLIST

Property UID# _____

Property Address: _____

Project Description: _____

Applicant: _____ Phone #: _____

Owner of Record: _____ Phone #: _____

Subdivision Name: _____ Developer's Lot # _____

The applicant is responsible for obtaining all required signatures

Department	Approved By:	Date	Comments/Stipulations
1. Tax Collector			
2. Historic District 775-2538			
3. Candlewood Shores 775-1172			
4. Public Works Dept.			
5. Inland Wetlands			
6. Zoning			
7. Health Department			
8. WPCA			
9. Fire Marshal			Read & Sign Review Sheet
10. Building Dept.			

FINAL APPROVALS

1. Historic District 775-2538			
2. Inland Wetlands			
3. Zoning Compliance Certificate			
4. Health Dept			
5. WPCA			
6. Fire Marshal Final Inspection			

**** The Building Dept., will schedule a final inspection after receipt of this completed checklist and a request for a final inspection. ****

7. Building Dept.** Final Inspection			
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TOWN OF BROOKFIELD

Activity # _____

**Pool/Hot Tub Application
Zoning Approval Request**

APPLICATION DATE: _____

PROPERTY I.D. # _____

APPLICANT/AGENT:

Name: _____

Address: _____

Contact Name: _____

Phone #: _____

LANDOWNER OF RECORD:

Name: _____

Address: _____

Contact Name: _____

Phone #: _____

Check all that apply:

Pool () Tub ()

Above Ground: ()

In-Ground: () With Deck ()

Without Deck ()

New Construction: ()

Repair: () Alteration ()

DIMENSIONS

Length	Width	Height	Depth shallow	Depth deep	Fence type	Fence hgt.	Fence to pool	\$ Value

SITE DATA:

Street Address: _____

Zoning District: _____

Subdivision Name: _____

Subdivision Lot: _____

Conservation Subdivision: _____

YES [] NO []

Has a variance been granted on property? YES [] NO []

Acres: _____

Lot Size: (Multiply acres by 43,560 sq. ft) = Square Feet: _____

Coverage:INSTRUCTIONS

Item

Square Feet

1. Enter FIRST FLOOR square footage from either:

House _____

i) Building Plans

Deck _____

ii) Assessor's Field Cards

Porch _____

Enter the First Floor square footage only for each item.

Garage _____

Shed _____

2. Enter square footage for proposed pool or tub

Other _____

3. Add total square footage

Proposed Pool/Tub _____

4. Divide Total Square Footage by Lot Size in
square feet to calculate Total Lot Coverage

Total square footage: _____

Total Lot Coverage:5. Enter all footage distances from a
structure to property lines and center of road.

6. Mark setbacks on site plan

Setbacks from:

Center of Road

Rear Lot Line

Left Side Line

Right Side Line

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I represent that this information is current, accurate and complete and that all the work has been completed in accordance with ordinances, regulations, building and health codes. I agree that any information that is determined to be false, or misleading will be subject to fines and penalties set by regulation, code or statute.

Signature: _____

Signature: _____

I certify that I am the designated agent for this project;

Property Owner

Contractor Name: _____ License #: _____ Phone #: _____

Electrician Name: _____ License #: _____ Phone #: _____

Plumber Name: _____ License #: _____ Phone #: _____

**TOWN OF BROOKFIELD
ZONING REGULATIONS**

**Miscellaneous Provisions
Swimming Pools - § 242-308G**

G. Swimming pools

Residential swimming pools of the following types -- in-ground, aboveground and semi-in-ground -- shall be permitted in any zoning district, provided that:

- (1) All of the applicable regulations of the State of Connecticut Building Code and any amendment thereto are complied with.
- (2) The following yard requirements are met:

ZONING DISTRICTS

Measurements in Feet

	R-7	R-40	R60	R-80	R-100	IGC 80/40	RC-41	RS40
Front yard	45	65	65	75	75	75/100	75	75
Side yard	10	20	20	30	30	20/30	20	20
Rear yard	10	20	20	30	30	30/30	30	30

NOTE: Side and rear yards are measured from the property line. Front yard shall be measured from the center line of the traveled portion of the road.

Town of Brookfield
Land Use Office
100 Pocono Rd.
Brookfield, CT 06804

ATTENTION PERMIT HOLDER

****It is the responsibility of the permit holder or agent to call for inspections (minimum 24 hours in advance). The permit holder is responsible for all construction for that project. An oversight of code requirement(s) during plan review does not relieve you of your responsibility for compliance. During inspections, you may be required to make changes to insure that the current building & fire codes are satisfied.****

- Per Chapter 127 of the Brookfield Code of Ordinances:

Building Inspections which result in a failure will incur an additional \$25.00 fee for each reinspection.

All reinspection fees shall be due and payable prior to the issuance of a Certificate of Occupancy.

- Per Chapter 242 of the Brookfield Code of Ordinances:

Site Stabilization Inspections which result in a failure will incur an additional \$25.00 fee for each reinspection.

All reinspection fees shall be due and payable prior to bond release.

I acknowledge that per the Brookfield Code of Ordinances, I will be responsible for reinspection fees as outlined above. I also understand that it is my responsibility to call for inspections of the project.

Applicant/Agent signature

Date

Letter of Authorization

To the Town of Brookfield:

I hereby declare the following:

- 1) That I am the owner of the premises described as follows:

_____	_____	_____	_____
Street Address	City	State	Zone

- 2) That I, _____, as property owner will act as general contractor.

OR

That _____ is duly authorized for and on behalf of the owner to execute an application for building permits to enable him/her to obtain permits to complete construction of the following work:

- 3) That _____ is hereby designated as the owner's representative with whom all town departments may deal with in respect to the work involved.

Date: _____

Owner: _____
Print Name Signature

TO CONTRACTORS:

CT. General Statutes (effective January 1, 2005):

§20-338b Building permit applications. Who may sign.

Any licensed contractor who seeks to obtain a permit from a building official may sign the building permit application personally or delegate the signing of the building permit application to an employee, subcontractor or other agent of the licensed contractor, provided, the licensed contractor's employee, subcontractor or other agent submits to the building official a dated letter on the licensed contractor's letterhead, signed by the licensed contractor, stating that the bearer of the letter is authorized to sign the building permit application as the agent of the licensed contractor. The letter shall not be a copy or facsimile, but shall be an original letter bearing the original signature of the licensed contractor. The letter shall also include:

1. The name of the municipality where the work is to be performed;
2. The job name or a description of the job;
3. The starting date of the job;
4. The name of the licensed contractor;
5. The name of the licensed contractor's agent; and
6. The license numbers of all contractors to be involved in the work.

STATE OF CONNECTICUT
WORKERS' COMPENSATION COMMISSION

Building Permit Affidavit for Property Owners or Sole Proprietors
(Conn. Gen. Stat. § 31-286b)

Property located at _____

In the town of _____

Name of building permit applicant: _____

Please check one:

1. ☐ I am the owner of the above property.
2. ☐ I am the sole proprietor of a business.

2A. Name of business _____

2B. Federal Employer Identification Number (FEIN) _____

.....
Pursuant to § 31-286b, "a property owner or sole proprietor [who] intends to act as a general contractor or principal employer" may provide either a certificate of workers' compensation insurance or a "sworn notarized affidavit... stating that he will require proof of workers' compensation insurance for all those employed on the job site in accordance with this chapter."

Please check one:

1. ☐ I do not intend to act as a general contractor or principal employer.
[Sign and stop here]

Signature of applicant

2. ☐ I intend to act as a general contractor or principal employer. Applicant must either provide a certificate of workers' compensation insurance or sign the affidavit below.

.....
Affidavit

I hereby swear and attest that I will require proof of workers' compensation insurance for every contractor, subcontractor, or other worker before he/she engages in work on the above property in accordance with the Workers' Compensation Act (Chapter 568).

I understand that pursuant to § 31-275 C.G.S., officers of a corporation and partners in a partnership may elect to be excluded from coverage by filing a waiver with the appropriate District Office; and that a sole proprietor of a business is not required to have coverage unless he files his intent to accept coverage.

Signature of applicant

Subscribed and sworn to before me this _____ day of _____, 200__.

(Notary Public/ Commissioner of the Superior Court)

Date : _____

To : Building Department
Town of Brookfield
100 Pocono Road
Brookfield, CT 06804

From : _____
Permit Applicant's Name

RE : _____ (Project Address)

This is to certify that the provisions of

____ Chapters 33 through 42 of the 2003 International Residential Code

or the

____ 2005 NFPA 70 National Electric Code

of the 2005 CT State Building Code shall be followed for the general scope of the electrical system and equipment requirements for the proposed work of this one or two-family dwellings, swimming pool and structures.

Permit Applicant's Signature

SWIMMING POOL AGREEMENT
TO INSTALL AND MAINTAIN SAFETY REQUIREMENTS

OWNER OF POOL: _____

LOCATION OF POOL: _____

TYPE OF POOL: ABOVE-GROUND _____ IN-GROUND _____

HOT TUB _____ SPA _____

POOL TO BE CONSTRUCTED BY _____

As the owner of the above mentioned property I agree to comply with the 1999 Connecticut Building Codes for swimming pool safety devices as follows but not limited to:

- Section AG105 – 2003 IRC
- The 2002 National Electrical Code

DATE _____

OWNER'S SIGNATURE _____

To: The Town of Brookfield
Building Department
100 Pocono Road
Brookfield, CT 06804

This letter is to certify that I will install a pool water alarm at the following address _____,
Brookfield, CT.

I understand a Certificate of Compliance will not be issued without a signed remittance of this letter. The signature must be witnessed by a member of the Building Department.

Signed and dated: _____.

Witness: _____

PA 99-140 AN ACT CONCERNING ALARMS
FOR NEW SWIMMING POOLS requires that a
pool alarm must emit a sound of at least 50 decibels
when a person or object weighing at least 15 pounds
enters the water in a swimming pool. It also requires
that there can be no permit issued for construction or
substantial alteration of a swimming pool at a residence
for one or more families unless a pool alarm is installed
with it. Effective October 1, 1999.

TOWN OF BROOKFIELD

LIMITATION OF APPEALS ON CERTIFICATES OF ZONING COMPLIANCE

1. **Procedure:**

The following procedure is in accordance with changes to §8-3 of the CT General Statutes effective 10/1/03:

Should an applicant wish to ***limit the time period of any appeal*** by any aggrieved party to the granting of a Certificate of Zoning Compliance to thirty (30) days from the date of a legal notice of the granting of such a certificate, the applicant may elect, at his discretion and expense, to provide legal notice in a newspaper with substantial circulation in the municipality.

If such notice is **not** provided, an appeal could be filed by any aggrieved party at any time subsequent to the issuance of the certificate.

SAMPLE LEGAL NOTICE

LEGAL NOTICE

A Certificate of Zoning Compliance has been issued to me by the Town of Brookfield for land and buildings located at _____
(street address)

to be used for the following purpose(s):

(state the "permitted use" and brief description of activity)

Any party aggrieved by this action may file an appeal with the Brookfield Zoning Board of Appeals pursuant to §8-7 of the CT. General Statutes.

Signed: _____, Certificate Holder.

2. **Applicant's Intent:**

☐

I do **NOT** intend to provide a legal notice

☐

I do intend to provide legal notice and will provide a copy of such notice to the Brookfield Land Use Office for filing within the application file.

(applicant's signature)

(date)

BROOKFIELD WATER POLLUTION CONTROL AUTHORITY
100 Pocono Road, Brookfield, CT 06804 (203) 775-7319 Fax (203) 775-2614

☐ CHANGE OF OCCUPANCY ☐ TENANT FIT-UP ☐ ADDITION/RENOVATION

IS PROPERTY CONNECTED TO SEWER?

☐ YES
☐ NO (NO ACTION REQUIRED)
☐ UNSURE (CHECK WITH W.P.C.A. OFFICE)

LOCATION OF PROPOSED BUSINESS/RENOVATION

_____ UNIT # _____

TYPE OF OPERATION:

☐ FOOD PREPARATION
☐ FOOD SALES
☐ HAIR CARE
☐ PHOTOGRAPHY
☐ VEHICLE REPAIR
☐ HAZARDOUS CHEMICALS
☐ MANUFACTURING
☐ OTHER (PLEASE LIST) _____

ESTIMATED WATER USE PER DAY IN GALLONS _____

NUMBER OF EMPLOYEES, FULL TIME _____ PART TIME _____

HOURS OF OPERATION _____ TO _____ # OF DAYS PER WEEK _____

PREVIOUS TENANT OR BUSINESS _____

PRINTED NAME OF PROPERTY OWNER _____

PROPERTY OWNER'S SIGNATURE _____ DATE _____

CONTACT NAME _____ PHONE # _____

W.P.C.A. SIGN OFF: ☐ APPROVED ☐ DENIED ☐ OTHER

COMMENTS _____

W.P.C.A. SIGNATURE _____ DATE _____

Contacted by: _____ Date: _____ via: _____
Contacted by: _____ Date: _____ via: _____
Contacted by: _____ Date: _____ via: _____

Effective 3/15/06

§242-301C

Add as follows:

Digital Map Submission

Prior to issuance of a final Certificate of Zoning Compliance, any "as-built" survey must be submitted in both paper & electronic format for all buildings constructed pursuant to a Design Review, Design Review Approval Modification involving building footprint changes, lot line changes, residential new construction or alterations with footprint changes within 10% of the minimum setbacks, and any activity permitted as a result of a variance granted by the Zoning Board of Appeals. The electronic format shall be for purposes of updating the Town's Geographic Information System (GIS) and shall meet the following criteria:

1. Drawings shall be on a compact disk (CD).
2. Electronics shall be in a format as prescribed by Town's GIS coordinator.

A certification letter stating that the electronic drawing is a copy of the survey map that was presented to the Zoning Enforcement Officer shall accompany electronic drawings. A land surveyor licensed by the State of Connecticut shall certify the letter.

ie:

